

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO. 70/748034  
APPLICANT(S)

FILING DATE

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		CLAIMS								
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP	IND	DEP
1	1		1												
2		1		1				31							
3		1		1				32							
4		2		2				33							
5		2		2				34							
6		2		2				35							
7		1		1				36							
8		1		1				37							
9		2		2				38							
10		2		2				39							
11		2		2				40							
12		1		1				41							
13		1		1				42							
14		1		1				43							
15		1		1				44							
16		1		1				45							
17		1		1				46							
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49															
50															
TOTAL IND.	2		2					TOTAL IND.							
TOTAL DEP.	31		24					TOTAL DEP.							
TOTAL CLAIMS	33		26					TOTAL CLAIMS							